

PLANNING AND BUILDING DEPARTMENT

Mechanical Installation Permit Application

| Owners Name: | | | |
|---|-----------------------------|----------------------------|----------------------------------|
| Mailing Address: | | CityState_ | Zip Code |
| Applicant (if other than owner) | | Phone: (|) |
| Applicant (if other than owner) Mailing Address: | City _ | State | Zip Code |
| Note: If applicant is other than owner, a notarized or his/her authorized agent may sign either the app | | | this application. Only the owner |
| Job site address: | | | |
| Parcel Number | Section: | Township: _ | Range: |
| Contractor Information: | | | |
| Name: | | Phone(|) |
| Company Name: | | Phone(|) |
| Mailing Address: | | | |
| State of Idaho HVAC License Number: _ | | | |
| Number of HVAC units to be installed: | | | |
| | Manu. 1 | | |
| 2 | 2 | | |
| 3 | 3 | | |
| 4 | 4 | | |
| Job description: | | | |
| | | | |
| [Provide all necessary informat OFFICE USE: | ion such as heating/cooling | calculations, plans, etc.] | |
| Permit No: | Cost: \$50 anch | unit = | |
| Paid by: | | | |
| Date Issued: | By: | | |
| Date Issued. | Бу | | |
| APPLICANTS SIGNATURE, CERTIFIC | TATION AND AUTI | IODIZATION: Under | panalty of pariury I haraby |
| certify that I have read this application an | | | |
| information which may be hereafter given | | | |
| Board of County Commissioners of Tetor | | | |
| regulations and State laws relating to the | | | |
| this County to enter upon the above ment | | | y audionize representatives of |
| In signing this application, I acknowledge | | | ation and permit fees does not |
| constitute approval of the permit. I agree | | | |
| to approval of this application by the appr | | | |
| | | | |
| Signature of Applicant | | Date | |
| Print Name | | Title | |